

Exhibit 1

Department of State: Division of Corporations

[Allowable Characters](#)[HOME](#)

Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

File Number: **7578756** Incorporation Date / **7/20/2023**
Formation Date: (mm/dd/yyyy)

Entity Name: **AMERICAN LEGACY PARTNERS INC.**

Entity Kind: **Corporation** Entity Type: **General**

Residency: **Domestic** State: **DELAWARE**

REGISTERED AGENT INFORMATION

Name: **UNASSIGNED AGENT**

Address:

City: County:

State: **NullValue** Postal Code: **95050**

Phone:

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status, Tax & History Information

For help on a particular field click on the Field Tag to take you to the help area.

[site map](#) | [privacy](#) | [about this site](#) | [contact us](#) | [translate](#) | [delaware.gov](#)